

COVER PAGE

A PUBLIC DOCUMENT

2018 EDITION (2018/2019)

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Campbell	Cameron	D

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Natural Resources, Department of Conservation

Division, Board, Department, District, if applicable

Your Position

Division Oil, Gas, & Geothermal Resources, Inland

District Deputy

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

<input type="checkbox"/> State	<input type="checkbox"/> Judge or Court Commissioner (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input type="checkbox"/> County of _____
<input type="checkbox"/> City of _____	<input type="checkbox"/> Other _____

3. Type of Statement (Check at least one box)

<input checked="" type="checkbox"/> Annual: The period covered is January 1, 2018, through December 31, 2018.	<input type="checkbox"/> Leaving Office: Date Left _____/_____/_____ (Check one circle.)
-or- The period covered is _____/_____/_____, through December 31, 2018.	<input type="radio"/> The period covered is January 1, 2018, through the date of leaving office.
<input type="checkbox"/> Assuming Office: Date assumed _____/_____/_____	<input type="radio"/> The period covered is _____/_____/_____, through the date of leaving office.
<input type="checkbox"/> Candidate: Date of Election _____ and office sought, if different than Part 1: _____	

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _____

Schedules attached

<input type="checkbox"/> Schedule A-1 - Investments – schedule attached	<input type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached
<input type="checkbox"/> Schedule A-2 - Investments – schedule attached	<input type="checkbox"/> Schedule D - Income - Gifts – schedule attached
<input type="checkbox"/> Schedule B - Real Property – schedule attached	<input type="checkbox"/> Schedule E - Income - Gifts - Travel Payments – schedule attached

-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS (Business or Agency Address Recommended - Public Document)	STREET	CITY	STATE	ZIP CODE
4800 Stockdale Hwy., Suite 100	Bakersfield	CA	93309	
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS			
(661) 334-3643	cameron.campbell@conservation.ca.gov			

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/14/2019
(month, day, year)

Signature



(File the originally signed paper statement with your filing official.)